

RECEIVED
CENTRAL FAX CENTER

JAN 20 2004



OFFICIAL

Facsimile Cover Sheet

P-10445.00

To: Examiner Joseph S.
Machuga
Company: U.S. Patent and Trademark Office
Phone:
Fax: 703 872 9306

From: Michael C. Soldner
Company: Medtronic
Phone: 763 514 4842
Fax: 763 505 2530

Date: January 19, 2004

**Pages including this
cover page:** 12

Comments: RE: P-10445.00
Serial No. 10/033,816

Applicants: Mark Tobritzhofer, et al.

Filed: December 20, 2001

Title: MEDICAL LEAD ADAPTOR ASSEMBLY WITH RETAINER

Attached please find the following documents:

Amendment
 Transmittal

IF TELECOPY IS ILLEGIBLE OR ALL PAGES HAVE NOT BEEN RECEIVED, PLEASE CONTACT KATHY ALTMAN AT TELEPHONE (763) 514-3392 IMMEDIATELY.

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ON THIS TRANSMITTAL FORM. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE, AND RETURN THE ORIGINAL MESSAGE TO US AT THE ADDRESS LISTED ABOVE VIA THE U.S. POSTAL SERVICE. THANK YOU.

DOCKET NO.: P-10445.00

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
AMENDMENT TRANSMITTAL

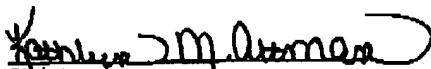
In re Application of: Mark Tobritzhofer, et al.

For: MEDICAL LEAD ADAPTOR ASSEMBLY WITH RETAINER

Serial No.: 10/033,816

Filed: December 20, 2001

CERTIFICATE UNDER 37 CFR §1.8 I hereby certify that this Amendment and Transmittal and the paper(s), as described herein are being sent to teletypewriter No. (703) 872 9306, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 20th day of January, 2004.



Signature

Kathleen M. Altman

Printed Name

Mail Stop NON-FEE AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

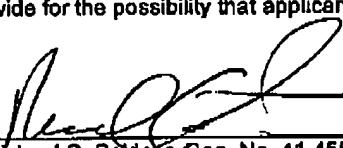
 AMENDMENT

Applicant hereby petitions for _____ months' extension of time. If an additional extension of time is required, please consider this petition therefor.

Please charge Deposit Account No. 13-2546 in the amount of \$ _____ for the one-month extension fee.

Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked on this Amendment Transmittal with regard to this filing. A duplicate of this transmittal is enclosed.

Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time.

January 20, 2004
Date
Michael C. Soldner, Reg. No. 41,455
Telephone: (703) 514-4842
Customer No. 27581